

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail**

**Mail Stop ISSUE FEE**  
**Commissioner for Patents**  
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CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

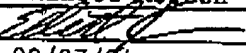
23914 7590 07/27/2004

**STEPHEN B. DAVIS**  
**BRISTOL-MYERS SQUIBB COMPANY**  
**PATENT DEPARTMENT**  
**P O BOX 4000**  
**PRINCETON, NJ 08543-4000**

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## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

**Elliott Korsen** (Depositor's name)  
 (Signature)  
**09/07/04** (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/808,832	03/15/2001	Robert A. Copeland	PH-7134	5618

TITLE OF INVENTION: PEPTIDASE-CLEAVABLE, TARGETED ANTINEOPLASTIC DRUGS AND THEIR THERAPEUTIC USE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	10/27/2004
EXAMINER	ART UNIT	CLASS-SUBCLASS			
RUSSEL, JEFFREY E	1654	514-008000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☒ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 **Elliott Korsen**

2

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

**Bristol Myers Squibb Pharma Company**  
**Reel 012607 Frame 0038**

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

**Princeton, NJ U.S.A.**

Please check the appropriate assignee category or categories (will not be printed on the patent);

☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee  
☒ Publication Fee (No small entity discount permitted)  
☒ Advance Order - # of Copies **10**

4b. Payment of Fee(s):

☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.
☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number **19-3880** (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is not claiming SMALL ENTITY status. See, e.g., 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

(Authorized Signature)

(Date)

09/07/04

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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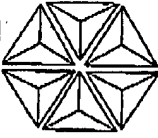
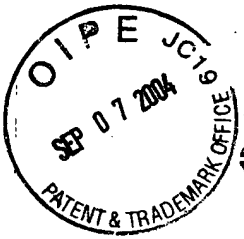
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 03 FC:8001 30.00 DA

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OMB 0651-0033 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

PAGE 2/3 \* RCVD AT 07/2004 1:21:47 PM [Eastern Daylight Time] \* SVR:USPTO-EFXXF-212 \* DNIS:7464000 \* CSID:609 252 7485 \* DURATION (mm-ss):01:30

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Bristol-Myers Squibb Company  
Patent Department

#4537

DATE: September 7, 2004

**FACSIMILE TRANSMITTAL SHEET****URGENT**

TO: USPTO – Issue Fee Branch  
FAX NO.: 1-703-746-4000  
FROM: Elliott Korsen  
TELEPHONE NO.: (609) 252-4741  
FACSIMILE NO.: (609) 252-7485  
RE: U.S. Application Serial No.: 09/808,832  
Attorney Docket No.: PH7134 NP  
Number of Pages: 3 (including cover sheet)

**CERTIFICATE OF TRANSMISSION VIA FACSIMILE**

I hereby certify that this correspondence, a 1) Issue Fee Transmittal (1 page) and 2) "Fee Address" Indication Form (1 page) are being facsimile transmitted to the U.S. Patent and Trademark Office, Fax number 703-746-4000 on September 7, 2004.

Elliott Korsen /Depositor

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